San Bernardino County CSS WORK PLAN CSS Plan – 2005-06, 2006-07, 2007-08

Exhibit 4

Program Work Plan Name: OLDER ADULT FULL SERVICE PARTNERSHIP

Work Plan Number - OA-2

Program Description:

San Bernardino County has developed an array of services for Older Adults that struggle with severe mental illness (SMI). These services include:

- Provide mobile outreach for crisis response
- Provide crisis prevention and comprehensive mental health and substance abuse screening
- Integrate geriatric assessment, benefits eligibility, and information
- Linkages and referrals to clients, family, and care providers
 - Through outreach to isolated seniors in their homes
 - o To the homeless in vivo settings, including on-site services such as senior centers, nutrition sites, churches, and other community settings.
- A transportation component
 - o Includes the purchase of two (4-wheel drive) vans to facilitate team mobility and reach geographically isolated Older Adults in the High Desert region.
- Full Service Partnership (FSP) system of care
 - Goals of the FSP would be to increase access to care and the ability to manage independence while reducing episodic institutionalization and incidents of relapse.

Priority Populations:

- Unserved and underserved Older Adults who are homeless or at risk for homelessness.
- Priority will be given to those with the most severe conditions, with the highest incidence of emergency, and with inpatient services utilization, or those having the most difficulty accessing care due to system barriers.

In the Full Service Partnership component, the priority population will be 13 SMI Older Adults with the most severe conditions,

- I.e. clients who have
 - o a) History of repeated emergency health services;
 - o b) Several admissions to inpatient services or are at risk for institutionalization;
 - o c) Been homeless or at risk for homelessness.
- Services may be extended to adults, ages 55 59 years, whose service needs are likely to extend into older adulthood.

According to prevalence data, Euro-Americans and Latino older adults make up the most underserved population. Significant efforts will be made to work with these identified groups.

The number of clients projected to receive services is 17 under Full Service Partnerships, 450 under System Development, and 300 under Outreach and Engagement for a total of 767.

Older Adults	Unserved, Underserved or Inappropriately Served
African-American	11%
Asian-American	10%
Euro-American	48%
Latino	23%
Native-American	1%
Other	7%

Strategies:

#	Name and Description	Fund Type			Budget		
		FSP	SD	OE	Expense	Revenue	Net CSS
	Senior Peer Counselors will receive initial orientations and training, which will include information about the unique mental health	Х	X	X	\$1,284,650	\$188,181	\$1,096,469

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 Certificated training in geriatric mental health for mental health professionals and other aging network service providers (i.e. Senior Peer Counselors, all volunteers, staff, service agencies, etc.) Outreach to skilled Nursing Facilities (SNF's), convalescent hospitals, and physicians offices to educate about and assist in identification of older adult mental health issues. Assist those interested in employment opportunities by referral to programs, such as Vocational Rehabilitation, Department of Aging and Adult Services (DAAS) Senior Employment Program, State of California Employment Development Program, and other community agencies such as faith organizations. Contract with community services for episodic transportation needs. Share responsibility for treatment, support and referrals for any rehabilitation services. 					
 Provide 24/7 multidisciplinary teams services. Multifaceted interventions to be provided wherever needed. Teams work in partnership with collaborative services. There are no time limits for appropriate services for those clients and families participating in the Full Service Partnerships. Provide intensive case management and treatment follow-up for FSP clients. Sustained management is focused on self- 	X				

directed client goals, comprehensive planning with community/family support to reach optimal mental and physical health. • Utilize existing Residential Care Facilities for the Elderly (RCFEs) and assisted living facilities for placement, as needed. Provide for residential care that has an augmentation for special care to provide modified older adult wraparound services with contracts for 9 units. The placement will enable the older adult to live at the lowest level of care for as long as possible. (See Housing Exhibit) • FSP staff ratio of 1:10. CIRCLE OF CARE team members and Senior Peer counselors specifically trained to work with SMI older adults. Mobile team members share responsibility for treatment, support and referrals for any rehabilitative services.	
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